

COMBINED DECLARATION AND POWER OF ATTORNEY

As below named inventor, I hereby declare that

This declaration is of the following type: ORIGINAL.

My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first, and sole inventor (*if only one name is listed below*) or an original, first, and joint inventor (*if plural names are listed below*) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DISTRIBUTING PACKETS AND PACKETS FRAGMENTS POSSIBLY RECEIVED OUT
OF SEQUENCE INTO AN EXPANDABLE SET OF QUEUES OF PARTICULAR USE IN
PACKET RESEQUENCING AND REASSEMBLY

the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

As a named inventor, I hereby appoint Kirk D. Williams, Reg. 42,229 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

I further direct that correspondence concerning this application be directed to:

CUSTOMER NUMBER 26327
Kirk D. Williams, Esq.
The Law Office of Kirk D. Williams
1234 S. OGDEN ST.
Denver, CO 80210
303-282-0151 (telephone)
303-778-0748 (facsimile)

I hereby declare that all statements made herein of my own knowledge are true, that all statements made on information and belief are believed to be true, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: EARL T. COHEN

Inventor's signature Earl T. Cohen

Date 3/26/04

Country of Citizenship: USA

Residence: FREMONT, CA

Post Office Address: 43750 CAMERON HILLS DR., FREMONT, CA 94539

Full name of second joint inventor, if any: JOHN ANDREW FINGERHUT

Inventor's signature John Andrew Fingerhut

Date 3/26/2004

Country of Citizenship: USA

Residence: CAMPBELL, CA

Post Office Address: 821 VIRGINIA AVENUE, CAMPBELL, CA 95008

Full name of third joint inventor, if any: JOHN J. WILLIAMS, JR.

Inventor's signature _____

Date _____

Country of Citizenship: USA

Residence: PLEASANTON, CA

Post Office Address: 2513 TANAGER DRIVE, PLEASANTON, CA 94566

Full name of second joint inventor, if any: **JOHN ANDREW FINGERHUT**

Inventor's signature _____

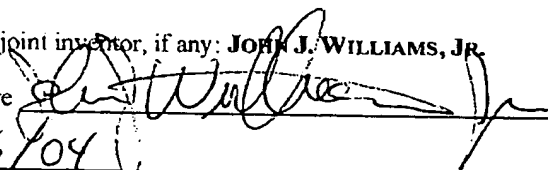
Date _____

Country of Citizenship: **USA**

Residence: **CAMPBELL, CA**

Post Office Address: **821 VIRGINIA AVENUE, CAMPBELL, CA 95008**

Full name of third joint inventor, if any: **JOHN J. WILLIAMS, JR.**

Inventor's signature  _____

Date 3/25/04

Country of Citizenship: **USA**

Residence: **PLEASANTON, CA**

Post Office Address: **2513 TANAGER DRIVE, PLEASANTON, CA 94566**

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SEE EXECUTED Declaration included
Herewith. This is provided
for your ease of reading.
Thanks!

PATENT
Attorney's Docket No. 65609

COMBINED DECLARATION AND POWER OF ATTORNEY

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Full name of sole or first inventor: **EARL T. COHEN**

Inventor's signature _____

Date _____

Country of Citizenship: USA

Residence: **FREMONT, CA**

Post Office Address: **43750 CAMERON HILLS DR., FREMONT, CA 94539**

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Attorney's Docket No. 65609
Combined Declaration and Power of Attorney - Page 2

Full name of second joint inventor, if any: **JOHN ANDREW FINGERHUT**

Inventor's signature _____

Date _____

Country of Citizenship: USA

Residence: **CAMPBELL, CA**

Post Office Address: **821 VIRGINIA AVENUE, CAMPBELL, CA 95008**

Full name of third joint inventor, if any: **JOHN J. WILLIAMS, JR.**

Inventor's signature _____

Date _____

Country of Citizenship: USA

Residence: **PLEASANTON, CA**

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